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**FACSIMILE TRANSMISSION COVER SHEET**

Date: August 2, 2007

To: United States Patent and Trademark Office  
Examiner: Holton, Steven E.; Art Unit: 2629

Fax: (571) 273-8300

Re: **Application Serial No.: 10/660,818**  
Filing Date: 9/12/2003; First-Named Inventor: McKay  
Attorney Docket No.: 0270101

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 40

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated July 25, 2007.

Payment for Extra Claims Fee in the Amount of \$100.00 is hereby enclosed on Form PTO-2038.

Thank you.

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**AUG 02 2007**

Attorney Docket No.: 0270101

### AMENDMENT COVER SHEET

IN RE APPLICATION OF: McKay, Brent

SERIAL NO.: 10/660,818 FILED: 9/12/2003

FOR: Display Panels and Methods and Apparatus for Driving the Same

HONORABLE COMMISSIONER FOR PATENTS  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

No additional fee is required.  
 The fee has been calculated as shown below:

<input type="checkbox"/> EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

TOTAL EXTENSION FEE \$ 0.00  
 FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	75	MINUS ***77	* =	x 50	x 25	\$
INDEPENDENT	19	MINUS ***18	* = 1	x 200	x 100	\$ 100.00
First presentation of multiple dependent claim				+ 360	+ 180	\$

**TOTAL FEE FOR EXTRA CLAIMS \$ 100.00**

\* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.  
 \*\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.  
 \*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

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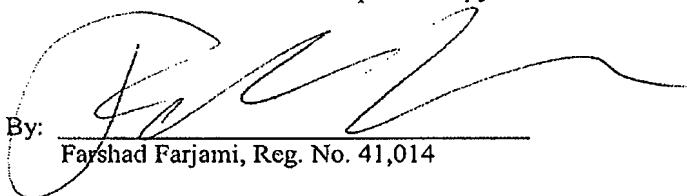
Attorney Docket No.: 0270101

Enclosed is the total fee of \$ 100.00 (Payment by Credit Card, Form PTO-2038 Enclosed).

Please charge Deposit Account No. 50-0731 in the amount of \$

The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

Date: 8/2/07

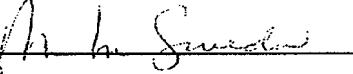
By:   
Farshad Farjami, Reg. No. 41,014

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being filed by facsimile transmission to United States Patent and Trademark Office at facsimile number **571-273-8300** on the date stated below. The facsimile transmission report indicated that the facsimile transmission was successful.

8/2/07

Date

Marci M. Sweda

Name of Person Performing Facsimile Transmission

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Application Serial No.: 10/660,818  
Attorney Docket No.: 0270101

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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AUG 02 2007

In re Application of: Brent McKay

Art Unit: 2629

Serial No.: 10/660,818

Examiner: Holton, Steven E.

Filed: September 12, 2003

For: Display Panels and Methods and Apparatus  
for Driving the SameAMENDMENT AND RESPONSE TO NON-FINAL OFFICE ACTION

Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment and Response is submitted in response to the *Non-Final Office Action*, dated July 25, 2007, in the above-referenced patent application. Please enter and consider the following amendments and remarks.

08/03/2007 WABDELRI 00000076 10660818

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